Phase 2 Revisions

Test #9

Scenario Changes

Forms Required: Form 8914

Other: Housed 4 qualified Hurricane Katrina victims

Made qualified cash contributions for increased charitable deduction

limits

Form 8914:

			# Consecutive Days
First and Last Name	<u>SSN</u>	Former Address	Lived with you
Bass Tone	400-55-4009	416 Gravier St	
		New Orleans, LA 70130	109
Tenor Tone	400-55-5009	416 Gravier St	
		New Orleans, LA 70130	109
Kiddie Tone	400-55-6009	416 Gravier St	
		New Orleans, LA 70130	109
Soprano Tone	400-55-7009	416 Gravier St	
-		New Orleans, LA 70130	109

Schedule A:

Line 15a: 1,000 **Line 15b:** 1,000

Script Changes - Form 1040

Literal: Hurricane Katrina

Line 40: 3,100 **Line 41:** 22,900 **Line 42:** 8,400 **Line 43:** 14,500 **Line 44:** 1,814 **Line 46:** 1,814 **Line 57:** 814 **Line 63:** 814 **Line 72:** 386 Line 73a: 386

Line 73b: XXXXXXXXX

Line 73d: XXXXXXXXXXXXXXXXXX

Test #12 – Form 1040

Scenario Changes:

⇒ Reduced combat pay W-2 to \$950

Entries not requiring forms: Form 1040, Line 66b: 950 Combat pay

Other: Form 1040, Line 66a: Literal: PYEI 13,700

Hurricane Katrina victim - elects to use 2004 earned income of \$13,700 for the look-back election for earned income credit and refundable child tax credit

Script Changes: Form 1040

Literal: Hurricane Katrina

Line 66a: 4,400

Literal PYEI 13700

Line 66b:950Line 68:405Line 71:5,805Line 72:4,090Line 73a:3,590

Form W-2 #2:

Box 3:950Box 4:59Box 5:950Box 6:14Box 12a:Q 950

Test #17

Scenario Changes:

Forms Required: Sch A, Form 8915, Form 4684

Information Returns Attached: Form 1099-R (1)

Other: Received qualified Hurricane Katrina distribution from 401(k) plan

Total loss of home due to Hurricane Katrina damages

Schedule A:

Line 5: 1245 Line 5a: X Line 19: 25,000

Form 8915:

Part I:

(a) (b)

Line 1: 45,000 45,000

Part II:

Line 6: 45,000

Form 4684:

Incident Date: 08/29/2005

Section A:

Line 1:TypeLocationDate AcquiredProperty A:Principle Residence26 Plantation Dr
Natchez, MS07/18/1997

Line 2: 147,000 Line 3: 122,000 Line 5: 189,000 Line 6: 0 Line 11: 0 Line 18: No

Script changes: Form 1040

Literal: Hurricane Katrina

Line 16a: 45,000 Line 16b: 15,000 Line 22: 31,119 Line 37: 27,019 Line 38: 27,019 Line 40: 26,245 Line 41: 774

Form 1099-R:

Payer's name, street address, city, state and zip Big Brokers

12 Wall Street

New York City, NY 10005

Payer's federal identification number13-4433221Recipient's identification number400-00-1011

Recipient's nameTest M Edgewood

Recipient's street address1234 Luke Thomas Blvd **Recipient's city, state, and zip**Quinton, AL 35130

Box 1:Gross distribution45,000Box 2a:Taxable amount45,000Box 7:Distribution code2

Test #22

Scenario Changes:

Forms Required: Form 3800, Form 5884A, Form 6251

Other: Schedule C #4 for Telemarketing is in a Hurricane Katrina core disaster area.

Claiming Hurricane Katrina Employee Retention Credit for wages paid from

August 28 – December 31.

Schedule C #4:

Line E: 420 Thompson Blvd

Mobile, AL 36611

Line 26: 3,800 (Note: 4,600 reduced by 800 Form 5884A credit)

Form 3800:

Line 1z: 800 **Line 9:** 1,696 **Line 19:** 800

Form 5884-A:

Line 1: 2,000

Form 6251:

Line 17: 3,556

Script Changes: Form 1040

Literal: Hurricane Katrina

 Line 55:
 800

 Line 55a:
 X

 Line 56:
 800

 Line 57:
 896

 Line 63:
 6730

 Line 72:
 570

 Line 73a:
 570

Line 73b: XXXXXXXXX

Line 73d: XXXXXXXXXXXXXXXXX